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## Application Number 10,007,009,009 Filing Date **MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET** Substitute for Form PTO-1360 (For use with Form PTO/SB/06) 4-19-09 \* May be used for additional claims or amendments 4-6-04 AFTER COO AFTER R CLAIMS AS FILED **AMENDMENT** AMENDMENT Indep Depend Indep Depend Indep Depend Indep Depend Indep Depend Indep Depend g Total Total Indep Indep Total Total Depend Depend Total Total Claims Claims

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